Indicator RECOMMENDED	Current Use of Inhalants by High School Students
Justification	Both immediate and long-term negative health consequences are known to occur from the use of inhalants. Long-term consequences of chronic exposure to inhalants has been associated with brain and other organ damage, neurocognitive impairment, congenital defects in children of abusers, and compromised immune system response. Even a single prolonged exposure by otherwise healthy individuals has been known to cause death as a result of cardiac arhythmia, asphyxiation, or suffocation.
Definition	Percent of students in grades 9 through 12 reporting that they sniffed glue, breathed the contents of aerosol cans, or inhaled paints or sprays, to get high within the past 30 days
Data Source	Youth Risk Behavior Surveillance System (YRBSS), Centers for Disease Control and Prevention (CDC)
Frequency	Biennial
Geographic Levels	National and State
Demographic Categories	Grade Level, Gender, and Race/Ethnicity
Strengths	An inhalant-specific measure provides more useful information for purposes of prevention planning and monitoring than a single global measure of illicit drug use. YRBSS estimates are typically based on larger samples than the National Survey on Drug Use and Health, and can be further broken down by grade level, gender, and race/ethnicity. Some states also collect YRBSS data for individual communities or school districts, which can be compared with their state-level data.
Limitations	Prevalence rates for current use of inhalants among high school students are relatively low and may be unstable due to small numbers of users. As of 2003, weighted representative samples were only available for 32 states. Not all states participate, and some participating states do not provide representative samples. YRBSS is a school-based survey, so students who have dropped out of school are not represented. It is also subject to bias due to self-report, non-coverage (refusal by selected schools to participate), and non-response (refusal/no answer).